SEP 0 5 2006

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden



Name of Offering (Schook if this is an amendm		
	Industrial Revenue Bonds (Leprino Fo	
	le 504 🔲 Rule 505 XX Rule 506 🔲 Section 416	Γ [TOF Series 2006 (the "Bonds")
Type of Filing New Filing Amendment		
	A. BASIC IDENTIFICATION DATA	
I. Enter the information requested about the issue	r	
Name of Issuer (check if this is an amendment	and name has changed, and indicate change)	
Leprino Foods Company		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1830 West 38th Avenue, Denver, CO		(303) 480-2600
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Producer of mozzarella and pizza of lactose products.	cheese products, along with sweet who	ey, whey protein concentrate, and
Type of Business Organization	_	
	l partnership, already formed other (p partnership, to be formed	lease specify):
Odzineza irazi	<u> </u>	, nocesse
Actual or Estimated Date of Incorporation or Organia	Month Year sation: 10 62 K Actual Estin	nated SEP 8 2000
Jurisdiction of Incorporation or Organization: (Enter	two-letter U.S. Postal Service abbreviation for State	
CN	for Canada; FN for other foreign jurisdiction)	CO THOMSON
GENERAL INSTRUCTIONS		FINANCIAL
Federal: Who Must File All issuers making an offering of security 77d(6).	rities in reliance on an exemption under Regulation D o	r Section 4(6), 17 CFR 230 501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than I and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United S	date it is received by the SEC at the address given be	A notice is deemed filed with the U.S. Securities dow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Comm	ission, 450 Fifth Street, N.W., Washington, D.C. 205	49.
Copies Required: Five (5) copies of this notice must photocopies of the manually signed copy or hear type	be filed with the SEC, one of which must be manually dor printed signatures	signed. Any copies not manually signed must be
Information Required: A new filing must contain all thereto, the information requested in Part C, and any mot be filed with the SEC	information requested. Amendments need only repor aterial changes from the information previously suppli	t the name of the issuer and offering, any changes ed in Parts A and B. Part E and the Appendix need
Filing Fee There is no federal filing fee		
State: This notice shall be used to indicate refiance on the UULOE and that have adopted this form. Issuers rely are to be, or have been made. If a state requires the accompany this form. This notice shall be filed in this notice and must be completed.	ing on ULOE must tile a separate notice with the Se payment of a fee as a precondition to the claim for	curities Administrator in each state where sales the exemption, a fee in the proper amount shall
<u> </u>	ATTENTION	
Failure to file notice in the appropriate sta	tes will not result in a loss of the federal exe	emption. Conversely, failure to file the

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Beneficial Owner Check Box(es) that Apply: Executive Officer XX Director General and/or Managing Partner Full Name (Last name first, if individual) Leprino, James G. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200 Promoter XX Beneficial Owner Executive Officer XX Director General and/or Managing Partner Full Name (Last name first, if individual) Leprino, Mike A., Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer XX Director General and/or Managing Partner Full Name (Last name first, if individual) Allen; Wesley J. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200 Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer XX Director General and/or Managing Partner Full Name (Last name first, if individual) Leprino, Terry L. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200 ☐ Beneficial Owner ☐ Executive Officer ※※ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Vechiarelli, Gina M. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200 Check Box(es) that Apply: Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Anderson, Terry L. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name tirst, if individual) Barz, Richard L. Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years:
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the iss
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Boynton, Robert D.
Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200
Check Box(es) that Apply: Promoter Beneficial Owner 🖾 Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Hegarty, Thomas G.
Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200
Check Box(es) that Apply: Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Jensen, Larry
Business or Residence Address (Number and Street, City, State. Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200
Check Box(es) that Apply: Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Klump, Ronald J.
Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200
Check Box(es) that Apply: Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Olsen, J. Bradley
Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200
Check Box(&) that Apply: Promoter Beneficial Owner 🔀 Executive Officer Director General and/or Managing Partner
full Name (Last name first, if individual)
Reidy, Michael
Business or Residence Address (Number and Street, City, State, Zip Code)
1830 West 38th Avenue, Denver, CO 80211-2200
Theck Box(es) that Apply: Promoter Beneficial Owner XX Executive Officer Director General and/or Managing Partner
full Name (East name first, if individual)
Kielsmier, Lester 0.
Business or Residence Address (Number and Street, City, State, Zip Code) 1830 West 38th Avenue, Denver, CO 80211-2200
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

			•		В.	INFORMA	TION ABO	UT OFFER	UNG				
1.	Has th	e issuer so	ld. or does	the issuer	intend to s	ell, to non-	-accredited	investors	in this offe	ring?		Yes	No XX
				An	swer also	iń Appendi	x. Column	2, if filing	under UL	OE.		_	_
2.	What i	s the mini	num invest	ment that i	will be acc	epted from	any indiv	idual?	••••••••••			s	,000,000.00
3.	Does t	he offering	, permit joir	nt ownersh	ip of a sin	gle unit?			***************************************			Yes [=]	No XX
4.	Enter	he inform:	ition reques	sted for ea	ch person	who has be	en or will	be paid or	given, dir	ectly or in	directly, any	_	
	eommi If a per or state	ssion or sir son to be li es, list the r	nilar remun sted is an as iame of the	eration for ssociated p broker or d	solicitatio erson or ag lealer. If m	n of purcha gent of a bro	sers in con oker or deal ve (5) perso	nection wit er registere ons to be lis	h sales of so ed with the sted are ass	curities in SEC and o	the offering r with a state rsons of such		
Ful	1 Name		tīrst, it inc plicable	lividual)									
Bu	siness or	Residence	Address ()	Number an	d Street, C	lity. State.	Zip Code)		· · · · · · · · · · · · · · · · · · ·				
Nai	me of As	sociated B	roker or De	aler									
		1 : 1 B	1 1 - 1 11-	. 11 -11 -11		6 . 11	D l						
Sta						s to Solicit		•				ΠА	II States
	AL	ĀK	[AZ]	AR	CA	CO	CT	DE	[DC]	FL	GA	HI	[ĬD]
	TL	IN		KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE.	NV	NH	Z	NM	NY	NC	ND	OH	ŌΚ	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	\overline{WA}	WV	WT	\overline{WY}	PR
Ful	l Name (Last name	first, if ind	ividual)			·			 	···		
Bus	iness of	Residence	Address (Number an	d Street, (City. State.	Zip Code)						<u> </u>
Nan	ne of As	sociated B	roker or De	aler									
Stat	es in Wi	nich Person	ı Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers	; ,		,			· · · · · · · · · · · · · · · · · · ·
	(Check	"All State	s" or check	individual	States)		•••••		••••	•••••		☐ Al	States
	AL	AK	ΑZ	AR	CA	CO	CT	DE	DC	FL	GA		ĪD
		IN		KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	M	NM	NY	NC	ND	OH	<u>OK</u>	OR	PA
	RI 2°	SC	SD	TX	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full		Last name	first, if ind	ividual)									
Bus	iness or	Residence	Address (?	Sumber an	d Street, C	lity, State,	Zip Code)						
Nan	ie of As:	sociated Br	oker or De	uler				·· ···································					
State						to Solicit						, , , , , , , , , , , , , , , , , , ,	l Carria
		"All States	or check	individual	States)					•••••		∐ Au	l States
	II.	<u>JK</u>		AR	CA	CO	CT	DE	DC	FL	GA.	HI	
	<u>III.</u>			KS.	KY	LA NM	ME NY	NC NC	MA ND	OH)	MX OK	MS OR	MO PA
	AL IL NII RI	NE SC	NV SD	T		T	VT	$\overline{V}X$	W.V.	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE. NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	:	
	Type of Security Issuer is conduit obligor under Lease and Installment Sale	Aggregate Offering Price	Amount Already Sold
	Data Agreement dated as of December 1, 1993 as amended, under which	\$ 22,000,000.0	os 22,000,000.00
	the Issuer is obligated to pay rents sufficient to amortize Equity the Bonds.	S	S
	Common Preferred		
	Convertible Securities (including warrants)	\$	S
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.			
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	s_22,000,000.00
	Non-accredited Investors		S
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		s
	Rule 504		S
	Total		s_0.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		,
	Transfer Agent's Fees	🗀 S	<u> </u>
	Printing and Engraving Costs	S	5
	Legal Fees	S	·
	Accounting Fees	s	
	Engineering Fees	S	
	Sales Commissions (specify finders' fees separately)		
	Other Expenses (identify)Trustee	_	1,500.00
	Total		1,500.00

	C. OFFERING PRICE, N	SUMBER OF INVESTORS, EXPENSES AND USE O	OF PROCEEDS	<u></u>
	and total expenses furnished in response to Part (offering price given in response to Part C — Questio C — Question 4.a. This difference is the "adjusted gr	ross	s 21,998,500.00
5.	each of the purposes shown. If the amount fo	s proceed to the issuer used or proposed to be used or any purpose is not known, furnish an estimate a al of the payments listed must equal the adjusted gr Part C—Question 4.b above.	and .	
			Payments to Officers. Directors. & Affiliates	Payments to Others
	Salaries and fees		🔲 S	S
	Purchase of real estate		🗀 \$	s
	Purchase, rental or leasing and installation of	machinery		
	· ·	facilities		
	Acquisition of other businesses (including the			. l 3
	offering that may be used in exchange for the		「 S	□ S
	Working capital		🔲 S	s
	Other (specify):		s	
			- 	s
	Column Totals Reimbursement to Iss	uer of acquisition and construction*	s 0.00	[] $[]$ $[]$ $[]$ $[]$ $[]$ $[]$ $[]$
	Total Payments Listed (column totals added)		<u> </u>	21,998,500.00
_		D. FEDERAL SIGNATURE		
gr	ature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this not furnish to the U.S. Securities and Exchange Commaccredited investor pursuant to paragraph (b)(2) o	nission, upon writte	le 505, the following n request of its staff,
รบ	er (Print or Type)	Signature	Date /	
	Leprino Foods Company	Muchael h. Ceide	8/24/01	Ç
an	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
n:	chaet L. Reidy	Sr. Vice President-Procuremen	+ Loaistics + P	YISING Doublame

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

 $[\]star$ costs paid to third parties in connection with the construction and installation of plant facilities and acquisition and installation of plant machinery and equipment.

		E. STATE SIGNATUI	RE	
1.		230.262 presently subject to any of the		Yes No
		See Appendix, Column 5, for sta	ite response.	
2.	The undersigned issuer hereby und D (17 CFR 239.500) at such time	dertakes to furnish to any state administra is as required by state law.	tor of any state in which this notic	ce is filed a notice on Form
3.	The undersigned issuer hereby ur issuer to offerees.	idertakes to furnish to the state administ	rators, upon written request, info	ormation furnished by the
4.	limited Offering Exemption (ULC	s that the issuer is familiar with the cond E) of the state in which this notice is file of establishing that these conditions hav	d and understands that the issue	
	uer has read this notification and kno thorized person.	ws the contents to be true and has duly cau	sed this notice to be signed on its	behalf by the undersigned
ssuer (Print or Type)	Signature	Date	
Name (1	Print or Type)	Title (Print or Type)	·	· · · · · · · · · · · · · · · · · · ·

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Al	PPENDIX					
I	Intend to non-a	d to sell accredited es in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pi	4 If investor and urchased in State t C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No	
AL										
AK										
AZ							····			
AR										
CA										
СО										
СТ								 		
DE								: 		
DC		;								
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MS										
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	. APPENDIX									
1	to non-	d to sell accredited rs in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited				No	
МО										
МТ	Age or not concern		•					,		
NE										
NV		į								
NH	<u> </u>	The second secon	<u> </u>							
NJ		2								
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VA		!								
WA		·					<u> </u>			
WV		:			!					
WI				<u> </u>						

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l		2					4							lification ate ULOE
	to non-a	to sell accredited as in State (-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)									
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR														

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